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CONFIRMATION NO. 1265

<b>SERIAL NUMBER</b> 09/863,035	<b>FILING OR 371(c) DATE</b> 05/22/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 10379.0047.DVUS00
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 09/121,567 07/23/1998 PAT 6,258,849

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY \*\*****\*\* 07/25/2001**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 6
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

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**TITLE**

TREATMENT REGIMEN FOR ADMINISTRATION OF PHENYLACETYLGLUTAMINE,  
PHENYLACETYLISOGlutAMINE, AND/OR PHENYLACETATE

<b>FILING FEE RECEIVED</b> 829	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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